
The United States Navy on the World Wide Web
A service of the Navy Office of Information, Washington DC
send feedback/questions to comments@chinfo.navy.mil
The United States Navy web site is found on the Internet at
<http://www.navy.mil>

Navy and Marine Corps Medical News, #03-26; July 10, 2003

- Forward Deployed Dental Readiness Helps Fleet
- Reservists Reinforce Rota Hospital
- Tumor Registry Helps Cancer Patients Worldwide
- Reservists Support NNMC Mission During OIF
- NEHC Offers Training on Patient-Centered Preventive Counseling
- EMTs Provide Lifeline To Cherry Point Community
- Healthwatch: Don't Get Beat By The Heat

Forward Deployed Dental Readiness Helps Fleet
By Bill Doughty, U.S. Naval Hospital Yokosuka Public
Affairs

YOKOSUKA, Japan - "Fleet Dental" in Yokosuka is living up to its name in the summer of 2003.

U.S. Naval Dental Center Far East is hosting USS Kitty Hawk's (CV 63) dental department at its Fleet Bayside Annex while the "Battle Cat" is in dry dock. USS Blue Ridge's (LCC 19) dental team is using the Mobile Dental Annex, formerly deployed at Ikego. And, at the Fleet Recreation Center's Fleet Dental Center, business is booming as Sailors come in to take care of their dental readiness responsibilities.

"We've made a maximum effort to make times available," said Capt. David Rickey, Dental Corps, branch dental director. "It's been a challenge to coordinate all of this, but it's going really well."

Recently, the dental center provided assistance to the crew of USS Lassen (DDG 82), an Arleigh Burke-class, guided-missile destroyer on its first cruise, now forward-deployed in the western Pacific in support of the global war on terrorism.

Chief Hospital Corpsman (SW) Shawn Wolfe, independent duty hospital corpsman for Lassen, said, "to be able to pull into here and get a hundred appointments in a week - arranged just by e-mail - is absolutely wonderful. Absolutely."

He added, "It seems like anything we've needed to get done, despite the fact that we've crammed their schedule, is being done. I've got people getting cleanings, fillings, teeth extracted, everything that they need done is happening."

Medical or dental readiness is critical for afloat forces.

"It's essential," said Wolfe. "Most of my problems, as far as medevac, are when a person comes in with tooth pain because I can't really treat it."

According to dental patient Senior Chief Storekeeper (SW) Samson Ballesta, USS Lassen's senior storekeeper, the service and can-do attitude of the staff are appreciated.

"It's just great, because it makes the crew happier," said Ballesta. "Healthwise, they're better off. And it contributes more to the morale of the ship, too, because they are being taken care of by the base."

-usn-

Reservists Reinforce Rota Hospital

By Lt.j.g. Christina Skacan, Naval Station Rota Public Affairs

ROTA, Spain - Throughout this year approximately 100 Reservists - a diverse group of surgeons, family practitioners, physical therapists, clinical dieticians, operating technicians and more - will serve at U.S. Naval Hospital Rota, Spain ensuring patients receive the continuous quality care they need.

"Reservists provide excellent support," said Hospital Corpsman 3rd Class (FMF) Richard Minter, Reserve liaison officer. "We have a lot of turnover, people PCS (permanent change of station) or vacation during the summer. It's a good opportunity for our staff to take some leave - we can slide a Reservist right into that spot."

Seamless integration of Reserves and active duty medical professionals means patients need not wait for treatment even if the sole provider of that hospital care must take leave, transition or complete temporary duty elsewhere. Currently both the physical therapist and clinical dietician are Reservists maintaining a full schedule of patient consultations.

"Reservists who fill in for physical therapists assigned to active duty provide a continuum of care - in other words the care does not stop," said Lt. Cmdr. Bette Guzman, Medical Service Corps, who serves with Fleet Hospital Minneapolis Det. 22 in Des Moines, Iowa.

"I'm carrying a full patient load for the two weeks I'm here, seeing patients every half hour," said Guzman. "I see a wide variety of diagnoses, mostly orthopedic and some post-surgical patients," she added.

Guzman maintains her most interesting case so far involved a patient who came in with hip pain, but suffered from a rotated pelvis. The Sailor struggled with the pain for some time, thinking it would go away, until barely able to get up from a chair. Guzman found the real source of pain, then prescribed stretches and muscle energy techniques designed to engage the muscle to support the joint.

"In two days he felt better, he said he even walks better," explained Guzman adding, "Improving 50 percent after two treatments - to me that's significant." Seeing the doctor or physical therapist contributes to how individuals function every day, therefore continuous care at Naval Hospital Rota affects readiness, deployments and quality of life.

Cmdr. Dennis Smith, Medical Service Corps, drills at National Naval Medical Center (NNMC) Bethesda, Md. and currently mans the nutrition clinic at Naval Hospital Rota. While consulting with patients, Smith completes a SOAP: gathering Subjective data provided by the patient, Objective data including lab work, blood pressure, height and weight, Assesses the subjective and objective data, then develops a Plan of action for the patient to follow.

"A doctor has to refer them to the nutrition clinic, then we jump on them to keep them healthy and ready for the fleet," said Smith.

Though trained as an operating room technician, Hospital Corpsman 1st Class Robert Paugh, of Fleet Hospital Fort Dix, Det. 0, works on preparations for MEDFLAG 03, the annual bilateral exercise providing joint training and humanitarian assistance in Africa, which will this year deploy Naval Hospital Rota doctors, nurses and corpsmen to Morocco.

"I'm working with the healthcare excellence department developing the handbook for MEDFLAG 03, collating data regarding preventative medicine, force protection issues, organizational information and even common French and Arabic translations," said Paugh.

Paugh, who in civilian life develops long-term health care plans, will also work on training. "I'll be preparing some medical training courses the U.S. medical personnel will present to the Moroccans, evaluating which courses are available and appropriate," added Paugh.

When a submarine crew recently visited the naval station, Hospital Corpsman 3rd Class Sue Barkman, of Fleet Hospital Fort Dix Det. 11, experienced the hectic clinical setting of the family practice teams. "You're getting the true, active duty members coming in with their ship specific concerns," said Barkman.

As a certified athletic trainer and instructor in civilian life, the general environment of the family practice clinic -- providing adult care, pediatrics, internal medicine and of course the variety of treatments required by the submarine crew -- offers Barkman diverse training to bring back to Naval and Marine Corps Reserve Center, Ebensburg, Pa.

-usn-

Tumor Registry Helps Cancer Patients Worldwide
By Jenna Shelby, U.S. Naval Hospital Yokosuka Public

Affairs

YOKOSUKA, Japan - It's the kind of registration no one wants, but tumor registration at U.S. Naval Hospital (USNH) Yokosuka, Japan, is a program that helps doctors assist their patients in battling malignant cancers.

Using the tumor registry, health care professionals go through a national database, called Acture. Doctors in the United States and at other military bases can now compare how patients with the same kind of cancer react to different treatments.

Why they do this is rather quite simple, explains pathologist Lt. Cmdr. Brian Schnell. "We're still learning about cancer, and the best way to learn is to watch how people react (to treatment)," he said.

According to Schnell, there are more than 40 malignant diagnoses of tumors yearly at USNH Yokosuka, so it's good to keep track of improvements and relapses.

This system helps compare cancers because every tumor behaves differently depending on size and location. Doctors use the program to get statistics on which medicines work and how people, as well as tumors, respond to those medicines.

"A diagnosis of Hodgkin's Disease used to be a death sentence," explains Schnell. Hodgkin's Lymphoma is a lymphatic disease that affects the immune system and kills 1,300 Americans each year. "Now it is a very treatable disease."

After someone is diagnosed with a malignant tumor, the lab is notified and starts gathering the patient's records.

"All information on patients is collected using pharmacy, radiology, inpatient and outpatient records," explains Kanako Shino, who is specially trained to use this system.

After reviewing the records, Shino goes through a process of answering questions to identify the type of tumor. This process can take some time - usually six months for a patient to get diagnosed and get all the paperwork and records to the lab to get analyzed.

"It's a lot of work," Shino confesses, "but it's a very good system and it really helps."

At the lab, they have to be sure to enter information very carefully, because data entered could be reviewed by many other hospitals and researchers.

"When we enter information into Acture, then people in the United States can see it too. Like if we forward a patient to Hawaii, they can look at Acture and find out what's going on with the patient."

This program is another way military medicine is improving the quality of health care and helping its patients.

Reservists Support NNMCMission During OIF
By Journalist 1st Class AnTuan Guerriy, National Naval
Medical Center Public Affairs

BETHESDA, Md. - When USNS Comfort (T-AH 20) deployed to the Arabian Gulf in January to support Operation Iraqi Freedom, it took with it more than 1,000 active-duty Sailors regularly assigned to the National Naval Medical Center (NNMC).

Consequently, more than 650 Navy Reservists received mobilization orders to NNMC to augment positions required for the hospital to maintain patient care.

Now that Comfort has returned, about 380 of the initial 650 reservists at NNMC have demobilized. The remaining Reservists are slated to depart by the end of August.

NNMC Reserve Liaison Officer, Lt. Cmdr. Priscilla Cullen, and her staff coordinated the Reserve mobilization process.

"We had a lot of help from different commands with the check-in process that made it really easy for us," explained Cullen. "With the Comfort being deployed, we had a need for Sailors all over the hospital. We literally had to place Reservists in every area of the hospital."

According to Chief Hospital Corpsman Alfred Linton, leading chief petty officer in the Reserve Liaison Office, the Reservists were placed in positions according to their Navy Enlisted Codes (NEC), or job specialty, and "wherever else they were needed."

Outside of the more traditional hospitalman NECs, like radiologist, pharmacy technician and anesthesiologist, the Reservists also filled non-traditional roles, such as mail clerk, manpower management and security force.

However, even with the arrival of the Reservists, the command was still only about 50 percent back-filled, according to Cullen. To maintain proper productivity in some departments, the Reservists had to work twice as hard and perform double the work.

Linton, a Reservist from Detroit, thinks that it is a testament to the willingness of the Reservists to do whatever was required to get the job done. Despite low manning, the mission was accomplished.

"I've got reports back from all over the hospital on how well the Reservists have transitioned in and performed in their duties," said Linton. "There were a lot of backlogs initially, but they worked hard with the remaining active-duty staff to get everything back up to speed, and in about a month, the productivity levels were back to pre-deployment levels."

Capt. John Oudshoorn, department head in the Operating Room (OR), believes teamwork was the key in

smoothly implementing Reservists.

"Initially, there were 45 Reservists assigned to the OR. At one point prior to the Comfort's return in June, about 75 percent of the staff in OR were Reservists," explained Oudshoorn, a Reservist from Grand Haven, Mich. "The cooperation between active-duty and the Reservists was outstanding."

Hospitalman Samuel Ramos, who works in Orthopedics and is one of the active-duty staff that remained at NNMC after Comfort's deployment to the Gulf, believes that, along with the knowledge they brought, the Reservists also provided a morale boost.

"Those guys were great to work with. They jumped right in and landed running," he said. "We went out together, as well as worked together. I wish they didn't have to go."

The one thing Oudshoorn said he is most proud of is that the OR staff was able to serve all war casualties without interruption, meaning they saw emergency patients without having to cancel scheduled (elective) patients.

"There was no limit as to the number or type of cases we were able to handle," added Oudshoorn.

One would think that with transitioning from civilian to military, adjustments would have to be made. Hospital Corpsman 2nd Class John DeBerry admitted that he had to make a few adjustments, and he pointed out one difference in particular.

"We had to be very patient when we started working with active duty again," stated DeBerry, a Reservist from Champaign, Ill. "In the civilian sector, time is money. But, in the military, it's more making sure the job is done right rather than just getting the job done."

Hospital Corpsman 2nd Class John Dalton, a Reservist out of Fort Walton Beach, Fla., believes that what they have accomplished, both since their arrival and during their tour on active duty at NNMC, is "pretty amazing."

Being sent to NNMC with little to no knowledge of active-duty personnel or even other Reservists, could have posed a serious threat to carrying out the mission, according to Dalton.

"When we (Reservists) first arrived here, there was only a few regular staff here to show us what to do. We had to find where simple things like sponges were stored," stated Dalton. "We took a building with people of all skills and ages from all over America and told them, 'go do surgery,' - and we did! ...We shared our knowledge, shoved aside our egos and made it happen, all in a very short period of time - and that's awesome!"

NEHC Offers Training on Patient-Centered Preventive Counseling
By Capt. Bruce K. Bohnker, Medical Corps, Navy Environmental

Health Center, Portsmouth Va.

PORTSMOUTH, Va. - The Navy Environmental Health Center (NEHC) in Portsmouth is Navy Medicine's Center for Public Health and Preventive Medicine. As such, NEHC focuses on the prevention of illness and injury in support of Force Health Protection.

The major determinants of health for the Navy population are associated with behavioral choices. For example, choices related to physical activity, nutrition, tobacco and substance use, sexual behavior, and injury prevention are key to preventing the most common and costly illnesses and injuries. In order to effect changes in behavior, the staff at NEHC looks for creative ways to educate the beneficiary population.

Steve Heaston, a public health educator in the Population Health Directorate, has adapted prevention strategies from the Centers for Disease Control and Prevention and the Department of Health and Human Services in the development of a course for Patient-Centered Prevention Counseling.

This two-day skills training course enhances the ability of health care professionals to provide patient centered prevention counseling within routine primary care appointments, within Preventive Health Assessment counseling, or during specialized counseling sessions. The course is targeted toward physicians, nurses, dietitians, health educators, and others who counsel individuals about health behavior changes.

The course teaches a six-step counseling process for behavioral change that highlights specific techniques to make the provider-patient encounter more productive and efficient. It shows providers how to identify risk behaviors with patients, identify safer goal behaviors, form an action plan, and deal with barriers to change.

The course also provides some instruction on counseling and behavior change and is highly interactive, giving students many opportunities to practice their new skills. At the end of the training, each student conducts a complete counseling session, based on real-life patient scenarios.

Heaston and fellow NEHC staff member Lynn Kistler recently completed the third session in San Diego.

The course will be conducted at the NEHC workshop in March 2004 and is presented on a request basis at other sites. Medical personnel can call (757) 953-0962 to discuss the details of sponsoring this training for their local staff.

-usn-

EMTs Provide Lifeline To Cherry Point Community
By Cpl. Nathaniel C. LeBlanc, Marine Corps Air Station
Cherry Point

MARINE CORPS AIR STATION CHERRY POINT, N.C. - When a medical emergency call occurs, the lives on the other end depend on the quick reaction of the dispatched paramedic teams.

These paramedics are the ever-watchful Navy corpsmen of Emergency Medical Services at the Halyburton Naval Hospital, who are dedicated and highly trained to address any medical situation at a moment's notice.

"We provide primary care to all the personnel and residents aboard the air station, with the addition of the surrounding community," said Hospital Corpsman 3rd Class Dante Cooley, emergency medical technician at Halyburton. "We are here in case of any type of patient transfer, whether it's a basic life support or advanced life support transfer, and also we respond to crash calls for the flight line."

Even though a majority of the air station's population is comprised of healthy individuals, the Emergency Medical Technicians (EMT) constantly train to be prepared for anything that may come their way.

"Most of our day encompasses a lot of training," said Hospital Corpsman 3rd Class Kenneth Sawyer, a Halyburton Reserve EMT. "When people think of paramedics, they mostly think of us as always on the go and responding to exciting calls, but it's more about training and preparing for those calls when they occur."

The EMTs put in many hours of training and are constantly sharpening their skills by continuously performing drills and exercises.

"We train at all times, during working hours and even after hours," Cooley said. "This helps us to stay on our toes, from the most minute case to a mass casualty scenario."

The EMTs coordinate and work closely with the fire department and local paramedics. They respond to an average of 90 calls a month, 10 percent of which support the surrounding community.

"Paramedics truly live up to the saying, 'everyday is a different day' because you can never know what to expect," Cooley said. "With that in mind, we always have to prepare ourselves for the unexpected."

The EMTs' main goal is to provide the community with the most efficient emergency response service with the mission to ensure every patient arrives at the hospital safely.

"I feel good about my job, it's given me a lot of new experiences and knowledge that I'll be able to pass on when I return as a civilian medic," Sawyer said. "I wake up happy knowing that we bring quality service to our customers, who are the service members, families and communities surrounding Cherry Point."

-usn-

Healthwatch: Don't Get Beat By The Heat
By Aveline V. Allen, Bureau of Medicine and Surgery

WASHINGTON - Summertime fun in the sun, on the beach or at a picnic is great, but beware of the effects the sun and heat can have on your body.

Heat-related illnesses include heatstroke (also known as sunstroke), heat exhaustion, heat cramps and sunburn. Each of these illnesses has specific symptoms associated with them.

Heatstroke can be a life-threatening condition. According to the Centers for Disease Control (CDC), it is a severe medical emergency and the person should be transported to a hospital emergency room immediately. Some of the symptoms related to this illness include an elevated body temperature rising to 106+ degrees Fahrenheit and above, hot, dry skin and a rapid pulse.

"Most heat injuries are preventable with good prior planning, and being attentive to activities you and your family are involved with," said Capt. Lynn Welling, Medical Corps, Navy Medicine specialty leader for Emergency Medicine at Naval Medical Center, San Diego, Calif. "The hotter and more humid it is, the more fluids you need. Depending on your activity level, and the temperature and humidity, you may need from five to 15 quarts of water daily."

Although not life-threatening, but very serious in nature, heat exhaustion includes symptoms such as heavy sweating, weakness, possible fainting and vomiting. The CDC recommends treating this condition by lying the person down in a cool place, applying cool, wet cloths and loosening clothing.

Heat cramps are also a very serious health condition. Symptoms include painful muscle spasms, mostly in the legs, arms and abdomen and heavy sweating. To remedy this condition, medical experts recommend stopping all strenuous activity, sitting quietly in a cool place, drinking clear juice or a sports drink and applying firm pressure on or gently massaging the cramping muscles in an effort to relieve the spasms.

"Drinking should be encouraged, even 'forced' every 20 minutes or so in hot environments," said Welling. "If you wait until you are thirsty, you are already dehydrated. Water or electrolyte solutions and soft drinks are the best for rehydrating."

Not only can the heat cause problems, but also the sun. Sunburn damages the skin, according to the CDC. Symptoms of sunburn include skin becoming red and painful, and unusually warm after sun exposure. On occasion, swelling, blisters, fever and headaches may accompany sunburn. The CDC recommends treating this condition by avoiding repeated sun exposure, applying cold compresses to the sunburned area, in addition to moisturizing lotion. Sunscreens that protect against

harmful ultraviolet rays can also help prevent sunburn.

In an effort to avoid getting heat-related illnesses, some helpful hints can help you beat the heat. During the summer months, medical health experts recommend wearing light-colored clothing, drinking plenty of water, eating small meals and eating more often, decreasing strenuous activity and taking frequent breaks.

"A good rule of thumb is to look at your urine," added Welling. "You should be urinating every two to three hours, and your urine should be light colored or clear."

As with any medical condition, if home treatment does not correct the problem, seek medical attention immediately.

Additional information on heat-related illnesses is at the Virtual Naval Hospital Web site (www.vnh.org/FM21-10/ch2.html#1) or the CDC Web site (www.cdc.gov/nceh/hsb/extremeheat.htm).

-usn-

Got news? If you'd like to submit an article or have an idea for one, please contact MEDNEWS at 202-762-3221, fax 202-762-1705 or btbadura@us.med.navy.mil.